STATE OF CALIFORNIA **INACTIVE TO ACTIVE LICENSE**

STATUS CHANGE 1800 37M-406 (REV. 3/06)

BOARD OF BEHAVIORAL SCIENCES 1625 NORTH MARKET BLVD., SUITE S200, SACRAMENTO, CA 95834

By:

TELEPHONE: (916) 574-7830 TDD: (916) 322-1700 WEB SITE ADDRESS: http://www.bbs.ca.gov

Please type or print clearly in ink. Be sure to provide all information.

FOR OFFICE USE ONLY: Date Ordered:

Allow 30 days fo	or your license reque	est to be processed
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For Office Use Only:
Cashiering No.:
Amt Paid:

llow 30 days for your license request to be processed.			Cashiering No.:	
			Amt Paid:	
VITAL INFORMATION	1			
Legal Name (as it app	ears on your license)			
License Number		Expiration Date		
Address of Record				
City		State	Zip Code	
Business Phone		Residence Phone		
completed the continu license, I did not enga	ing education required to		se to an active license. I have During the time I had an inactive I.	
Please initial below				
		emaining portion of the renewa my inactive license (fee and	al fee of \$ to reactivate license enclosed).	
			al fee of \$ to reactivate ense with this request because it has	
Please circle one LOST	STOLEN	DESTROYED	NEVER RECEIVED	
destroyed or			se is if it has been lost, stolen, een mutilated, the document to be	
		s of the State of California that day of	at the foregoing is true and correct.	
Signature				

IMPORTANT INFORMATION

When reactivating your license, please remember to return your "INACTIVE" license with this request.

To activate your license, the required **36** hours of CE must have been completed within 2 years prior to the postmarked date of this request.

DO NOT SUBMIT PROOF OF CE WITH THIS REQUEST

A renewal period is defined in the CCR section 1887 as the two-year period which spans from a license's expiration date to the license's next expiration date.

If some or all of the hours used to activate the license are completed in their current renewal period, those hours **CAN** be used for both the activation <u>and</u> for their upcoming renewal.

For activation, the licensee can count CE hours back for two years based on the post-mark date on the activation form. Any CE hours completed in the prior renewal period **CANNOT** be used toward the upcoming renewal.

Example:

John Doe's renewal period is April 1, 2002 through March 31, 2004. He renewed inactive in 2002 and sends his activation request postmarked March 15, 2003. He has 12 CE hours with the completion date of March 25, 2002 and the rest of his hours (24) were completed between April 1, 2002 and March 15, 2003. He has enough hours to activate his license and he has 24 hours of CE already completed for his March 31, 2004 renewal.

You may earn 12 hours of your required CE through self-study courses.

CE must be taken from a BBS approved provider or accredited school.

For additional clarification, please call the board at (916) 574-7830.

NAME CHANGES

You must use your LEGAL name for your professional license. If you have a name change that you would like to have processed with this form, you must submit the only acceptable documentation of either a <u>copy</u> of your marriage certificate, divorce decree or court order. A driver's license and social security card will <u>NOT</u> be accepted as proof of a legal name change.

The Board of Behavioral Sciences does not discriminate on the basis of disability in employment or in the admission and access to its programs or activities.

The Executive Officer of the Board has been designated to coordinate and carry out this agency's compliance with the nondiscrimination requirements of Title II of the ADA. Information concerning the provisions of the ADA, and the rights provided hereunder, are available from the ADA Coordinator.